

REGIONAL BUSINESS AND LABOR ADVISORY BOARD
CENTER OF OCCUPATIONAL HEALTH AND EDUCATION (COHE)
St. Luke's Rehabilitation Institute – MOB Room 200
Friday, October 18, 2013
12:00 p.m. – 2:00 p.m.

M I N U T E S

Present: (*Voting Members)

*Mandy Bruce, Zirkle Fruit Company
*Mollie Lutz, Kennewick School District
*Suzanne Schmidt, Employer Resources Northwest
*Caroline Wyatt, Yokes Washington Foods Inc.
*Ed Wood, CWA 7818
*Rolf Laurin, United Steelworkers 338
*Karen Gude, UFCW 1439

Absent:

Vacancy, Labor Member

COHE Staff:

Dan Perrow, Group Health COHE
Nancy Webster, Director EW COHE
Ben Doornink, Business Services Manager EW COHE
Pam Cromer, Health Services Coordinator EW COHE
Lorrie Anne Brown, Provider Relations Coordinator EW COHE
Kathy Woodfield, Administrative Coordinator EW COHE

Guests:

Ulrike Berzau, Administrator/St. Luke's Rehab Institute
Dr. Jamie Lewis, St. Luke's Rehab Institute
Dr. Gary Franklin, L&I
Janet Peterson, L&I
Diana Drylie, L&I
Morgan Wear, L&I
Leah Hole-Marshall, L&I
Dr. Chris Goodwin, Spokane Regional Occupational Medicine

(TH) = Attend via TeleHealth or Telecom

I. Call To Order:

- Janet Peterson called the Board Meeting to order at 12:00pm
- Roll was called for October 18th meeting. Quorum was met.

II. Introductions: Janet Peterson and Gary Franklin

All participants introduced themselves.

Janet thanked the members for attending the first COHE Regional Business and Labor Advisory Board meeting and emphasized how important business and labor will be in making sure the COHE best practices are available to 100% of injured workers by December 2015.

Gary shared the history of the COHE program, including the active involvement of business and labor at all levels of design and implementation.

III. Role of the Regional Business/Labor Advisory Board: Diana Drylie

Draft Charter: Diana shared the draft charter for the regional Board. The draft charter was modified from the original charter of the Provider Network Advisory Group.

- Board member Suzanne Schmidt stated that she would like to have the opportunity to go through the complete document and come back to a subsequent meeting and put it to a vote.
- **Action Item:** It was requested by Karen Gude that the charter reflect that the officer positions be held by one member from Business and one from Labor.

New Chair and Vice Chair: Business and Labor caucuses met and selected Suzanne Schmidt as Chair of the board. Suzanne announced that Karen Gude is Vice Chair.

Executive Committee: The Board members would like to include an executive committee in the charter. The executive committee would be available upon request of any of the COHEs in Eastern Washington. This would enable them to provide timely business and labor responses between official board meetings. The executive committee would also be responsible for formulating agenda items for the meetings of the full board.

ACHIEV Committee: How can members of the board participate in ACHIEV? Can representatives from the board attend in the audience or join in via conference call?

- ACHIEV started out as the Provider Network Advisory group and has formal agendas and handouts posted on L&I's website at [Advisory Committee on Healthcare Innovation and Evaluation \(ACHIEV\)](#). The meetings are public and the time and place are confirmed approximately 3 weeks prior to the meeting. Board members can review the agenda online and decide whether or not to attend. People can attend ACHIEV meetings in person or by conference call.
- Meetings are held in January, April, July and October.
- The next ACHIEV meeting (October 24, 2013) will include a discussion about how they would like to interact with the COHE Regional Business and Labor Advisory Boards.
- **Action Item:** All members would like to be on the distribution list for the ACHIEV committee.

IV. COHE Expansion:

Morgan Wear shared an update regarding the statewide COHE program.
(Attachment - 3 Statewide Handouts)

- The Eastern Washington board supports the COHEs with providers in eastern Washington. The COHEs in eastern Washington are sponsored by:
 - Group Health Cooperative (statewide COHE)
 - St. Luke's Rehabilitation Institute.
- The Western Washington Regional Business and Labor Advisory Board will provide support to COHEs with providers in western Washington. The COHEs in western Washington are sponsored by:
 - The Everett Clinic
 - Franciscan Health Systems
 - Group Health Cooperative (statewide COHE)
 - Harborview Medical Center
 - Valley Medical Center.
- When the COHEs complete their recruitment and expansion plans, there will be COHE providers in 38 of 39 counties.
- The number of COHE providers is expected to increase from 2,000 to approximately 3,500 providers. This increase will take place over the next couple of years.
- Injured worker access:
 - Goal for December 2013:
 - 50% of injured workers live within 15 miles of a COHE provider.
 - Current status (as of September 2013):
 - 82% of self-insured injured workers live within 15 miles of COHE provider.
 - 75% of state fund injured workers live within 15 miles of a COHE provider.

V. COHE Reports:

Group Health COHE Report

Dan Perrow reported that he was very excited to be a part of the Regional board meeting and COHE. Group Health has partnered with St. Luke's for almost 2 years with other programs.

- Group Health was an early partner with Valley Medical Center when they were awarded their COHE program over 10 years ago.

Group Health COHE Team:

- COHE Medical Director is Dr. Tim Gilmore. He is a fantastic resource for us. He is the one who started the occupational medicine program at Group Health almost 30 years ago and he comes with a lot of experience.
- COHE Program Director is Tom Lehmann. Tom has extensive experience in vocational rehab and workers' comp rehab.
- Health Services Coordinators for Group Health are:
 - Mimi Perrin – also the provider trainer.
 - Ryan Manuel – also the community outreach coordinator
 - Chuck Cooper
 - Janice LeGros - She is the HSC providing support in eastern Washington. Janice will make regular trips to the area.

Group Health Vision and Goals:

- “Group Health wants to become the institutional model for how COHE Best Practices are implemented as standard work processes within one institution and one organization”.
- We want to set a very high standard for how our medical providers work with and communicate with not just the patients but with the employers, labor and also with the payers and L&I in this case.
- Group Health’s High Level Vision: Group Health’s vision for quality is predicated on our belief that our approach to delivery means better clinical outcomes for all of the members, patients and other stakeholders, all at an affordable price. Our future means that our members and patients will consistently say that we provide the best care, information, advice and support. Outstanding service every time and at a value that not only meets but exceeds their expectations.
 - We want to make sure we can deliver a consistent high quality of care regardless of where that patient touches our system.
 - We want to disseminate the best practices between the departments and then spread those quality improvements into primary care, urgent care and specialty services.
- We are uniquely positioned to be the provider and communicator with employers.
 - We want to improve our communication with employers about what those work restrictions are.
 - We would like to look at other ways to leverage the relationship we have with employers.
- Additional goals are to identify some new best practices, ways to reduce some long-term disability by identifying some other barriers to recovery.
- Group Health would like from the Business and Labor members to figure out how to get it out into the market place that your employees don’t have to be a Group Health member or offer a Group Health insurance plan in order to receive care at Group Health.
 - It is great to know that Group Health will take our employees even if they are not a member. It would be helpful for business and labor to have a poster that includes Group Health locations that will take care of injured workers. Employers want to tell the employees where to find good resources without directing them to any specific care provider.

Action Item: Suzanne requested from Dan Perrow for a list of the Group Health facilities in Spokane.

- Group Health Locations: Group Health has 4 dedicated locations here in Spokane along with a new partnership with Columbia Medical Associates that has 12 locations, totaling 16 locations here in Eastern Washington.
 - Group Health purchased CMA last year so they are still operating under the CMA name. But they are owned entirely by Group Health Cooperative enterprise as a separate entity.

Provider Enrollment: We have one trained provider here in Eastern Washington - Anne Donahue, a very talented board certified Occupational Medicine doctor.

- We are looking to hire an additional occupational health provider to partner up with Anne Donahue.
- Enrolled and trained 28 providers, 42 currently are in the process of being trained by the end of the year.

- 90% of the injured workers that are currently being treated by Group Health are being treated by the 28 trained providers.
- We have enrolled 5 advisors.

Relationship with Providence: January 1, 2013 we formed a separate LLC. It looks something like an ACO (Affordable Care Organization). We both came together to look how we can bring better outcomes and do some risk sharing cost in the market place here in Eastern Washington.

Challenges for the Group Health COHE:

- It is difficult to pull time loss data from EPIC.
- Two way contact between the provider and employer has not been a regular workflow of our providers. Dr. Anne Donahue in Spokane has implemented this best practice, and we have some great things to learn from her.
- We are right in the midst of preparing for healthcare reform and we went live on the exchanges 2 weeks ago. ICD10 is hitting next year and the world is a changing place for us and we are pushing through the COHE changes as well.

What is next for Group Health?

- This year:
 - Our goal is to complete the provider training for Group Health and CMA.
 - Launch our webpages
 - Fully implement Best Practices 3 and 4. Phone call to the provider and identifying the barriers to recovery.
- Next year:
 - Stabilize our processes and exceed COHE targets.
 - Focus on employer and labor communication and involvement.
 - Initiate our quality improvement project.
 - Look to evaluating and expanding our enrollment to some of our community and network providers.

St. Luke's Eastern Washington COHE Report

Ulrike Berzau began the St. Luke's COHE report.

- The COHE has new staff filling the program and medical director roles - Nancy Webster and Dr. Greg Carter.
- The goal for this contract period is to build on the strengths and many years of experience as a COHE in eastern Washington. The COHE will also continue building on the strong relationship and communication with L&I.
- One area of new interest is to use COHE as a means for injury prevention. This is a task that the COHE would like to undertake with the assistance of the board.

Nancy Webster introduced herself as the new COHE Program Director.

- Nancy is the Director for Rehabilitation Services at St. Luke's. She has been with St. Luke's for almost 20 years and has oversight of both inpatient and outpatient therapies across St. Luke's whole continuum.

Dr. Carter is the Medical Director for the St. Luke's COHE, but was not available for this meeting due to a speaking commitment.

- Dr. Carter is the Medical Director for St. Luke's Rehabilitation Institute and has very extensive experience in workers' compensation and is a member of the Industrial Insurance Medical Advisory committee.

Ben Doornink reported that they have two new HSCs in the Tri-Cities area.

- 118 additional providers from the 3 new counties (Tri-Cities and Kittitas)
- Expansion is in areas where providers have not heard of COHE, so introducing COHE Best Practices and COHE processes is often a major effort.
- Another challenge is working with hospital emergency department that use third party contracted services.

Questions and comments:

- Karen Gude expressed that the business and labor members have been involved for many years in order to advocate for the injured workers and be a voice for the community and the COHE.

- Karen also expressed that she was glad to hear that prevention and safety is one of St. Luke's priorities. That is a huge component for labor and they look forward to participating in future discussions about prevention.
- Suzanne Schmidt asked how the COHE plans to do injury prevention and education and how they will get information to employers.
 - Ulrike responded that St. Luke's has done injury prevention already through ergonomics. If the COHE sees a trend they will work with the employers and share what could have been done to prevent the injury.
- Caroline Wyatt publicly thanked Dr. Dan Hansen for introducing her to L&I's Safety and Health Investment Projects (SHIP) and helping their company to get an ergonomic specialist to help them develop the statewide standard for ergonomics training in the grocery industry.
- Dr. Gary Franklin reported that L&I met with Dr. Robert Waring in Walla Walla to thank him for his service as the Medical Director for the Eastern Washington COHE. Dr. Waring is highly committed to the COHE and will continue to be a leader in his community and for the COHE program at large to the extent that he can.

VI. Next Meeting:

Next Meeting: This item regarding the scheduling of the next meeting has been tabled until members can look at their schedules.

- Susan Campbell (susan.campbell@Lni.wa.gov) is the L&I contact for the Eastern Washington Regional Board members.
- Karen Gude requested that the member roster be updated and expanded to include additional contact persons.

Thank you to Dan Hansen: Ed Wood stated for the record that on behalf of the Labor and Business members he wants to express a profound thanks to Dr. Dan Hansen for the many years he put into making the Eastern Washington COHE successful. "We have the utmost respect for him for the amount of work he put into this program and he was a 'hell of a Medical Director.'"

Meeting adjourned: 2:05 pm